



LEISURE SERVICES
DEPARTMENT OF CULTURAL AFFAIRS

QUARTERLY CLASSES 2009
INSTRUCTOR APPLICATION

Attach a copy of your resume and up to 5 portfolio images.

Name: _____ M/F (circle one) Ethnicity (optional) _____

Address: _____ Apt.# _____

City: _____ State: _____ Zip: _____

Email Address: _____

Daytime Phone: _____ Cell Phone: _____

Class interested in teaching: 1) _____

Brief Class Description _____

Class interested in teaching: 2) _____

Brief Class Description _____

Class interested in teaching: 3) _____

Brief Class Description _____

Previous Teaching Experience

Employer _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Position: _____ Length of Employment: _____

Part-time: _____ Full-time: _____

Employer _____ Work Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Position: _____ Length of Employment: _____

Part-time: _____ Full-time: _____

Please return the application to:

Performing Arts

email - elizabeth_pyle@savannahga.gov

Visual Arts

email - lisa_bradley@savannahga.gov

mail - Department of Cultural Affairs

9 West Henry Street

Savannah, GA 31401